



JAN 28 2004

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**FACSIMILE COVER SHEET****OFFICIAL**

DATE: January 23, 2004 OUR REF.: ORAS003USANP(J&JO-104US)  
TIME: \_\_\_\_\_ YOUR REF.: 10/601,259

TO:	U.S. Patent and Trademark Office
COMPANY:	
FROM:	Robert L. Andersen <i>APB</i>
FAX TELEPHONE:	703-872-9306
OFFICE TELEPHONE:	
TITLE OF DOCUMENT:	Communication w/encls (POA and Corresp. Address Change & Statement Under 37 CFR 3.73(b))

Total Number of Pages: 5 (including this form)

COMMENTS

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PTO/SB/21 (08-03) (AW 10/2003)

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(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission 4.

Application Number	10/601,259
Filing Date	June 20, 2003
First Named Inventor	James R. Lawter
Art Unit	1615
Examiner Name	
Attorney Docket No.	ORAS003USANP(J&JO-104US)

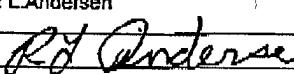
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**ENCLOSURES (Check all that apply)**

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Communication; Statement Under 37CFR 3.73(b)
<b>Remarks:</b>		

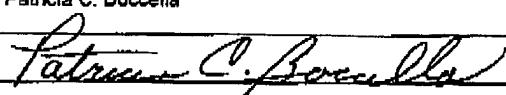
**SIGNATURE OF APPLICANT, ATTORNEY OR AGENT**

Firm or Individual	Robert L.Andersen	Registration No. (Attorney/Agent)	25,771
Signature			
Date	January 23, 2004		

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	Date	January 23, 2004	

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ORA5003USANP(J&amp;JO-104US)

PATENT

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No: 10/601,259  
Applicant: James R. Lawter  
Filed: June 20, 2003  
Title: RAPID RELEASE TETRACYLINE FORMULATIONS FOR  
TREATING OR PREVENTING MUCOSITIS  
TC/A.U.: 1615  
Examiner:

COMMUNICATION

Commissioner for Patents  
P.O. Box 1450  
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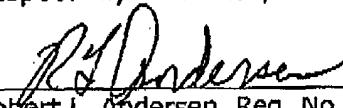
Sir :

Attached is an executed Power of Attorney and Correspondence Address  
Indication Form and a Statement Under 37 CFR 3.73(b). All future  
correspondence should now be directed to the attention of

Robert L. Andersen  
RatnerPrestia  
P.O. Box 980  
Valley Forge, PA 19482-0980

Phone: 610-407-0700  
Fax: 610-407-0701

Respectfully submitted,

  
\_\_\_\_\_  
Robert L. Andersen, Reg. No. 25,771  
Attorney for Applicant

RLA/pb

Dated: January 23, 2004

P.O. Box 980  
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PTO/SB/81 (09-03) (AW 10/2003)

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**POWER OF ATTORNEY  
AND  
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Application Number	10/601,259
Filing Date	June 20, 2003
First Named Inventor	James Ronald Lawler
Title	RAPID RELEASE TETRACYCLINE FORMULATIONS FOR TREATING OR PREVENTING MUCOSITIS
Art Unit	
Examiner Name	
Attorney Docket Number	ORA5003USANP(J&JO-104US)

I hereby appoint:

 Practitioners associated with the Customer Number:

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 Practitioner(s) named below:

Name	Registration Number

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I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	T. Murphy E. Tracy		
Signature	T. Murphy E. Tracy		
Date	5/21/04	Telephone	732-524-6586

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 Total of \_\_\_\_\_ forms are submitted.

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ORA5003USANP (J&amp;JO-104US)

PTO/SB/05 (04-03) (AW 08-03)

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**STATEMENT UNDER 37 CFR 3.73(b)**Applicant/Patent Owner: OraPharma, Inc.Application No./Patent No.: 10/601,259Filed/Issue Date: June 20, 2003Entitled: RAPID RELEASE TETRACYCLINE FORMULATIONS FOR TREATING OR PREVENTING MUCOSITIS

states that it is:

1  the assignee of the entire right, title, and interest; OR

2  an assignee of less than the entire right, title and interest.  
The extent (by, percentage) of its ownership interest is %

in the patent application/patent identified above by virtue of either:

A.  An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 013961, Frame 0908, or for which a copy thereof is attached.

OR

B.  A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

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Additional documents in the chain of title are listed on a supplemental sheet.

Copies of assignments or other documents in the chain of title are attached.

**[NOTE:** A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.8]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

1/21/04\_\_\_\_\_  
Timothy E. Tracy\_\_\_\_\_  
Typed or printed name\_\_\_\_\_  
Date\_\_\_\_\_  
732-524-6586\_\_\_\_\_  
Telephone NumberT  
\_\_\_\_\_  
Signature\_\_\_\_\_  
Assistant Secretary\_\_\_\_\_  
Title

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